							ructions and *Privacy ent On Reverse Side								
CLAIMANT'S NAME							SSN or EMPLOYEE NUMBER*					Page of Pages			
		Rudolph									Pres	ident's Of	fice		
POSITION CB/ID No. Executive Director M01							DIVISION or BUREAU				INDEX NUMBE			MBER	
Executive Director M01 RESIDENCE ADDRESS:							California Science Center HEADQUARTERS ADDRESS				268 TELEPHONE N			UC LIIIUDCO	
							700 Exposition Park Drive				(213) 744-74				
CITY STATE ZIP CODE							CITY				STATE ZIP CO				
CA							Los Angeles				CA 90037			7	
(1) NORMAL WORK HOURS 0800-1700 M-F							(2) PRIVATE VEHICLE LICENSE NUMBER N/A				(3) MILEAGE RATE CLAIMED 0.000				
(4) MONTH/YEAR		(6)	(7)	(8)	MEALS		(9)	(10) TRANSPORTA			TION		(11)	(12)	
4/10		LOCATION WHERE EXPENSES	LODGING	BREAK- FAST	LUNCH	O.T., L/T, N/C, RELC OR DINNER		(A)	(B)	(C)	(D)			TOTAL	
(5) DATE TIME		WERE INCURRED					TALS	COST OF TRANS.	TYPE	CARFARE, TOLLS, PARKING	MILES	TE CAR USE	BUSINESS	EXPENSES FOR DAY	
20	0500 2100	LAX-SMF/SMF-LAX, Sagramento CA		6.00	7,12		63 .			15.80	WILLS	0.00		34.55	
28-29	0500 1800	LAX-SMF/SMF-LAX, Sacramento CA								31.60		0.00		31.60	
							İ					0.00		0,00	
												0.00		0.00	
												0.00		0.00	
												0.00	·	0.00	
												0.00		0.00	
												0.00		0.00	
												0.00		0.00	
												0.00		0.00	
												0.00		0.00	
												0.00		0.00	
(13)		SUBTOTALS	0.00	6.00	7.12	5.6	63 0.00	0.00		47.40	0.00	0.00	0.00	66.15	
COI	.UMN (CODE (ACCTG, USE ONLY)	1												
														\$66.15	
(14) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)														sciences verecuses	
4/20/10 Traveled to Sacramento to attend budget hearings. Round trip airfare paid with State AMEX card \$287.40. 4/28-29/10 Traveled to Sacramento to attend Senate budget hearing. Round trip airfare paid with State AMEX card \$323.40. AGENCY ACCOUNTING OFFICE USE ONLY PAID BY REVOLVING FUND CHECK NUMBER AMEX card \$323.40.															
(15)												•		***	
	HEREB used, and SAM Sec NTIS SIG	Y CERTIFY That the above is a true st d if mileage rates exceed the minimum tions 0750, 0751, 0752, 0753 and 0754	atement of the rate, I certify the pertaining to v		ises incurred if operating the and seat belt		accordence with wr	h DPA jules i	n the sei				tely owned ve ments as pres	hicle was cribed by	
				DATE (16)			<u> </u>			D PAYMENT DATE					
(17) SPECIAL F SNATUR				<u>Z</u>			- · / <u></u>				6/9/10				
(17) SPE	:CIAL f	.SNATUR	RE and TITLE (See Ilem 17 on reverse)				• • •					9/	ATE/		